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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

NONE

JML

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 2	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged  Examiner's Signature: <i>Justin M. L...</i> Initials: JML				

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## TITLE

Backpack

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